

**STATE OF MICHIGAN
JUDICIAL DISTRICT
JUDICIAL CIRCUIT****PARTIAL PAYMENT RECEIPT AND
INVENTORY OF SEIZED PROPERTY****CASE NO.**

Court address

Court telephone no.

Plaintiff name(s)

v

Defendant name(s)

TO THE OFFICER SEIZING PROPERTY: This form must be filed with the court within 7 days of the payment of funds or seizure of property.

RECEIPT FOR PARTIAL PAYMENT OF FUNDS

1. I collected \$ _____ on _____ from _____ .
Date
2. Payment was made by ☐ cash. ☐ check no. _____ . ☐ money order/cashiers check no. _____ .
3. a. Balance due \$ _____
 b. Minus payment \$ _____
 c. Statutory service and mileage fees \$ _____
 d. Statutory percentage of line b. fees : 7% of _____ / 3% of _____ \$ _____
 e. Statutory expenses \$ _____
 f. Plus total of lines c, d, and e. above \$ _____
 g. Plus balance of statutory percentage fees : 7% of _____ / 3% of _____ \$ _____
 h. **New balance due** \$ _____

I acknowledge receipt of the payment listed on line 3b.

Date

Name (type or print)

Signature

Court officer/Deputy sheriff

Telephone no.

Attach additional sheets if necessary

INVENTORY OF PROPERTY SEIZED

Quantity	Item/Description/Model	Type/V.I.N./Serial Number

All property seized will be held for a minimum of 10 days. Property may be retrieved during this time by payment in full of the judgment and all statutory fees and statutory expenses. For further information call the individual named below. If the property is not retrieved, it will be sold at public sale according to law. The amount received from the sale, after all liens and statutory fees and statutory expenses have been deducted, will be applied to the judgment.

I certify that I am authorized to seize this property under MCR 3.106 and that the above statements are true and accurate.

Date

Name (type or print)

Signature

Court officer/Deputy sheriff

Telephone no.